VERMONT DEPARTMENT OF MENTAL HEALTH

<u>Application For Designation as a Physician Who Can Perform Emergency</u> <u>Examinations</u>

Please answer the following questions after you have attended the training on emergency exams, either in-person or the online training.

1.	By completing an emergency examination on an individual, you as the applicant physician may be required to testify at a court hearing regarding your examination. True
	☐ False
2.	Imminent danger is a requirement under the Vermont emergency examination statute. ☐ True
	False
3.	As a busy Emergency Room physician, I can rely on the Qualified Mental Health Practitioner's (QMHP) assessment and simply note that I concur with that assessment on the Emergency Exam forms.
	☐ False
4.	The three elements of assessment to determine whether or not a person is in Need of Treatment are: Criminal behavior, substance intoxication and absence of less restrictive options
	☐ Mental Illness, Developmental Disability and dangerousness
	☐ Mental Illness, Danger to self or others and Absence of less restrictive alternatives
	☐ Criminal behavior, Danger to self or others and Absence of less restrictive alternatives
5.	If a competent patient agrees to voluntary admission to the appropriate care, the clinicians cannot involuntarily admit the person to the hospital $\hfill\Box$ True $\hfill\Box$ False
Physici	an Signature: Date:
Name: ₋	
Instructio	ons:
1.	Please complete this Quiz after reviewing the training module for Physician Training Emergency Exam 2014 available at
	http://mentalhealth.vermont.gov/sites/dmh/files/documents/Manual/PhysicianTraining Emergency Exam 2014-
2.	09-24.pdf Attach answers to the EE-Physician-Application available at

 $\underline{http://mentalhealth.vermont.gov/sites/dmh/files/documents/Manual/EE-Physician-Application.pdf}$

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Send both to: Department of Mental Health, Commissioner's Office, 280 State Drive, NOB 2 North, Waterbury, VT 05671-2010, the fax the form please use our fax number 802-241-0100, or you can email the documents to